

**LAMAR CONSOLIDATED INDEPENDENT SCHOOL DISTRICT**

*PERMISSION REQUEST  
FOR ACCEPTANCE OF CASH AND/OR PERSONAL PROPERTY DONATIONS*

Date of Request \_\_\_\_\_

Name of School \_\_\_\_\_

Name of Donor \_\_\_\_\_

Value of Donation\* \_\_\_\_\_

Description of Property To Be Donated \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Donor \_\_\_\_\_

Projected Date of Delivery \_\_\_\_\_

Requested By \_\_\_\_\_

Date \_\_\_\_\_

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**Approvals**

Principal \_\_\_\_\_

Date \_\_\_\_\_

Superintendent \_\_\_\_\_

Date \_\_\_\_\_

**\*Please attach copies of all available documentation. The estimated fair market value of the personal property must be provided by the donor at the time of donation.**